

# HEALTH MAINTENANCE ORGANIZATIONS

Company Name: \_\_\_\_\_

NAIC Company Code: \_\_\_\_\_

Contact: \_\_\_\_\_

Telephone: \_\_\_\_\_

## Required Filings in the State of South Carolina

## Filings Made During the Year 2008

(1) Check- list	(2) Line #	(3) REQUIRED FILINGS FOR THE ABOVE STATE	(4) NUMBER OF COPIES*			(5) DUE DATE	(6) FORM SOURCE **	(7) APPLICABLE NOTES
			Domestic		Foreign			
			State	NAIC	State			
		<b>I. NAIC FINANCIAL STATEMENTS</b>						
	1	Annual Statement (8 1/2"X14")	1	EO	0	3/1	NAIC	
	1.1	Printed Investment Schedule detail (Pages E01-E25)	1	EO	xxx	3/1	NAIC	
	2	Quarterly Financial Statement (8 1/2" x 14")	1	EO	0	5/15, 8/15, 11/15	NAIC	
		<b>II. NAIC SUPPLEMENTS</b>						
	10	Accident & Health Policy Experience Exhibit	1	EO	0	4/1	NAIC	
	11	Actuarial Opinion	1	EO	0	3/1	Company	
	12	Investment Risk Interrogatories	1	EO	0	4/1	NAIC	
	13	Life Supplemental Data due March 1	1	EO	0	3/1	NAIC	
	14	Life Supplemental Data due April 1	1	EO	0	4/1	NAIC	
	15	Long-term Care Experience Reporting Forms	1	EO	xxx	4/1	NAIC	
	16	Management Discussion & Analysis	1	EO	0	4/1	Company	
	17	Medicare Supplement Insurance Experience Exhibit	1	EO	xxx	3/1	NAIC	
	18	Medicare Part D Coverage Supplement	1	EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC	
	19	Property/Casualty Supplement due March 1	1	EO	0	3/1	NAIC	
	20	Property/Casualty Supplement due April 1	1	EO	0	4/1	NAIC	
	21	Risk-Based Capital Report	1	EO	0	3/1	NAIC	
	22	Schedule SIS	1	N/A	N/A	3/1	NAIC	
	23	Supplemental Compensation Exhibit	1	N/A	N/A	3/1	NAIC	
		<b>III. ELECTRONIC FILING REQUIREMENTS</b>						
	40	Annual Statement Electronic Filing	xxx	1	xxx	3/1	NAIC	
	41	March .PDF Filing	xxx	1	xxx	3/1	NAIC	
	42	Risk-Based Capital Electronic Filing	xxx	1	N/A	3/1	NAIC	
	43	Supplemental Electronic Filing	xxx	1	xxx	4/1	NAIC	
	44	Supplemental .PDF Filing	xxx	1	xxx	4/1	NAIC	
	45	June .PDF Filing	xxx	1	xxx	6/1	NAIC	
	46	Quarterly Electronic Filing	xxx	1	xxx	5/15, 8/15, 11/15	NAIC	
	47	Quarterly .PDF Filing	xxx	1	xxx	5/15, 8/15, 11/15	NAIC	
		<b>IV. AUDITED FINANCIAL STATEMENTS</b>						
	51	Accountants Letter of Qualifications	1	N/A	N/A	6/1	Company	S
	52	Audited Financial Statements	1	EO	xxx	6/1	Company	
	53	Audited Financial Statements Exemption Affidavit	0	N/A	N/A	See Note	Company	T
	54	Independent CPA	1	N/A	N/A	See Note	Company	U
	55	Notification of Adverse Financial Condition	1	N/A	N/A	Within 5 days of receipt from CPA	Company	
	56	Report of Significant Deficiencies in Internal Controls	1	N/A	N/A	7/31	Company	V
	57	Request for Exemption to File	0	N/A	N/A	See Note	Company	W
		<b>V. STATE REQUIRED FILINGS</b>						
	101	Certificate of Compliance of Advertising. See 25A S.C. Code Ann. Regulation 69-17, Section 17. (Insurers Writing A&H, Only)	1	0	1	3/1	Company	O
	102	Filings Checklist (with Column 1 completed)	1	0	0	3/1	State	
	103	Holding Company Registration Statement	1	0	0	3/1	State	
	104	Premium Tax Form	1	0	1	3/1	State	P
	105	SC Health Ins. Pool Assessment Base Reporting Form	1	0	1	3/1	State	Q
	106	State Filing Fees	1	0	1	3/1	State	R
	107	Comprehensive Annual Analysis	1	0	0	3/15	State	N
	108	Comprehensive Annual Analysis Checklist	1	0	0	3/15	State	N
	109	Comprehensive Quarterly Analysis	1	0	0	5/30, 8/29, 11/29	State	N
	110	Comprehensive Quarterly Analysis Checklist	1	0	0	5/30, 8/29, 11/29	State	N
	111	Market Value of Securities Which are on Deposit With This Department as of June 30, 2008 form.	1	0	1	8/1	State	O
	112	Membership by County in SC	1	0	1	3/1, 5/15, 8/15, 11/15	State	
	113	HMO Supplement Form 1122	1	0	1	3/1	State	O

\*If XXX appears in this column, this state does not require this filing, if hard copy is filed with the state of domicile and if the data is filed electronically with the NAIC. If N/A appears in this column, the filing is required with the domiciliary state. EO (electronic only filing).

\*\*If Form Source is NAIC, the form should be obtained from the appropriate vendor.



		<b>NOTES AND INSTRUCTIONS</b>	
A	Required Filings Contact Persons:	Tim Campbell, Chief Financial Analyst Office of Financial Analysis tcampbell@doi.sc.gov 803-737-6109	Premium Tax Form Questions: Mary Sturkie msturkie@doi.sc.gov 803-737-6082
B	Mailing Address:	Physical Address: South Carolina Department of Insurance 1201 Main Street, Suite 1000 Columbia, SC 29201	Mailing Address: South Carolina Department of Insurance Post Office Box 100105 Columbia, South Carolina 29202-3105
C	Mailing Address for Filing Fees:	See Note B.	
D	Mailing Address for Premium Tax Payments:	See Note B.	
E	Delivery Instructions:	All required filings must be physically received in the Department no later than the indicated due date. If the due date falls on a weekend or a holiday, the next business day will be considered the due date.	
F	Late Filings:	Companies will be fined for a late filing on a case-by-case basis.	
G	Original Signatures:	Original signatures are required on all required filings.	
H	Signature/ Notarization/ Certification:	Required annual statements must be verified by at least two of its principal officers, at least one of whom prepared or supervised the preparation of the annual statement. See S.C. Code Ann. Section 38-13-80(A).	
I	Amended Filings:	Amended items must be filed within 10 days of their amendment, along with an explanation of the amendments. The signature requirements for the original filing should be followed for any amendment.	
J	Exceptions From Normal Filings:	Foreign companies should supply a written copy of any exemption or extension received by its state of domicile at least 10 days prior to the filing due date to receive an exemption or extension from the Department. Domestic companies should apply for an exemption or extension at least fifteen days prior to the filing due date.	
K	Bar Codes:	Required only for NAIC filings. Please follow the instructions in the NAIC Annual Statement Instructions.	
L	Signed Jurat Page:	Not required from foreign insurers.	
M	NONE Filings:	See NAIC Annual Statement Instructions.	
N	CAA and CQA:	See "Attachments to State Filing Checklists."	
O	Special Filings:	<p>1. Certificate of Compliance of Advertising (all insurers writing A&amp;H, only) pursuant to 25A S.C. Code Ann. Regulation 69-17, Section 17B. Each insurer required to file an Annual Statement which is now or which hereafter becomes subject to the provisions of these rules must file with the Department, with its Annual Statement, a Certificate of Compliance executed by an authorized officer of the insurer wherein it is stated that, to the best of his knowledge, information and belief, the advertisements which were disseminated by the insurer during the preceding statement year complied or were made to comply in all respects with the provisions of these rules and the Insurance Laws of this State as implemented and interpreted by these rules.</p> <p>2. Market Value of Securities Which are on Deposit With This Department as of June 30, 2008 form. See "Attachments to State Filing Checklists."</p> <p>3. HMO Supplement Form 1122. See "Attachments to State Filing Checklists."</p>	
P	Premium Tax Form:	The South Carolina Premium Tax Form will <u>not</u> be mailed to companies. See "Taxation" under "Company Services" at <a href="http://www.doi.sc.gov">www.doi.sc.gov</a> .	

Q	SC Health Insurance Pool Assessment Base Reporting Form:	The SC Health Insurance Pool Assessment Base Reporting Form will not be mailed. See "Attachments to State Filing Checklists."
R	Filing Fees:	South Carolina's filing fees are strictly retaliatory. Companies will show filing fees on Schedule 02, Column B of the South Carolina Premium Tax Form.
S	Accountants Letter of Qualifications:	Statement that the independent CPA consents to the requirements of S.C. Code Section 38-13-80 and, more specifically, the NAIC Annual Statement Instructions – Annual Audited Financial Reports (relating to definitions, availability and maintenance of independent certified public accountant work papers) and that the independent CPA consents and agrees to make available for review by the Director, the Director's designee or Department examiners, the work papers, as defined in the NAIC Annual Statement Instructions – Annual Audited Financial Reports.
T	Audited Financial Statements Exemption Affidavit:	Automatic if company meets criteria set forth in NAIC Annual Statement Instructions – Annual Audited Financial Reports; therefore, a request for exemption or an affidavit of exemption is not required.
U	Independent CPA Rotation:	A partner or other person responsible for rendering an audited financial report may not act in that capacity for more than 7-consecutive years. Following a 7-year period of service, the person will be disqualified from acting in that or similar capacity for the same insurer or its insurance subsidiaries or affiliates for 2 years. An insurer may apply in writing, by January 31 seeking relief from the rotation requirement because of unusual circumstances.
V	Report of Significant Deficiencies in Internal Controls:	Due within 60 days of the filing of the audited financial report only if significant deficiencies are noted and remedial actions are not described in the audited financial report.
W	Extensions for Filing Audited Financial Statements:	Extensions of the filing date may be granted by the Director for 30-day periods upon showing, by the insurer and its independent certified public accountant, the reasons for requesting an extension by the Director. The request for extension shall be submitted in writing at least 10 days prior to the due date in sufficient detail to permit the Director to make an informed decision with respect to the requested extension.

**General Instructions  
For Companies to Use Checklist**

**Please Note:** This state's instructions for companies to file with the NAIC are included in this Checklist. The NAIC will not be sending their own checklist this year.

**Electronic Filing is intended to include filing via the Internet or filing via diskette with the NAIC. Companies that file with the NAIC via the Internet are not required to submit diskettes to the NAIC. Companies are not required to file hard copy filings with the NAIC.**

**Column (1) (Checklist)**

Companies may use the checklist to submit to a state, if the state requests it. Companies should copy the checklist and place an "x" in this column when mailing information to the state.

**Column (2) (Line #)**

Line # refers to a standard filing number used for easy reference. This line number may change from year to year.

**Column (3) (Required Filings)**

Name of item or form to be filed.

The **Annual Statement Electronic Filing** includes the annual statement data and all supplements due March 1, per the *Annual Statement Instructions*. This includes all detail investment schedules and other supplements for which the *Annual Statement Instructions* exempt printed detail.

The **March .PDF Filing** is the .pdf file for annual statement data, detail for investment schedules and supplements due March 1.

The **Risk-Based Capital Electronic Filing** includes all risk-based capital data.

The **Supplemental Electronic Filing** includes all supplements due April 1, per the *Annual Statement Instructions*.

The **Supplemental .PDF Filing** is the .pdf file for all supplemental schedules and exhibits due April 1.

The **Quarterly Electronic Filing** includes the complete quarterly filing and the PDF files for all quarterly data.

The **Quarterly .PDF Filing** is the .pdf file for quarterly statement data.

The **June .PDF Filing** is the .pdf file for the Audited Financial Statements.

**Column (4) (Number of Copies)**

Indicates the number of copies that each foreign or domestic company is required to file for each type of form. The Blanks (E) Task Force modified the 1999 *Annual Statement Instructions* to waive paper filings of certain NAIC supplements and certain investment schedule detail, if such investment schedule data is available to the states via the NAIC database. The checklists reflect this action taken by the Blanks (EX4) Task Force. XXX appears in the “Number of Copies” “Foreign” column for the appropriate schedules and exhibits. **Some states have chosen to waive printed quarterly and annual statements from their foreign insurers and have chosen to rely upon the NAIC database for these filings. This waiver could include supplemental annual statement filings. The XXX in this column might signify that the state has waived the paper filing of the annual statement and all supplements.**

**Column (5) (Due Date)**

Indicates the date on which the company must file the form.

**Column (6) (Form Source)**

This column contains one of three words: “NAIC,” “State,” or “Company.” If this column contains “NAIC,” the company must obtain the forms from the appropriate vendor. If this column contains “State,” the state will provide the forms with the filing instructions (generally, on the state web site). If this column contains “Company,” the company, or its representative (e.g., its CPA firm), is expected to provide the form based upon the appropriate state instructions or the NAIC *Annual Statement Instructions*.

**Column (7) (Applicable Notes)**

This column contains references to the Notes to the Instructions that apply to each item listed on the checklist. The company should carefully read these notes before submitting a filing.